

STATE OF TENNESSEE DEPARTMENT OF COMMERCE AND INSURANCE BURIAL SERVICES

500 JAMES ROBERTSON PARKWAY, SECOND FLOOR NASHVILLE, TN 37243-1145

Office: 615-741-5062; Fax: 615-532-1903

www.state.tn.us/commerce

CEMETERY REGISTRATION

	Name of Cemetery to be registered:					
	(P.O. Box or Street)		(City)	(State)	(Zip)	
	Physical Address or location description:				(Zip)	
		(Street)	(City)	(State)	(Zip)	
2.	Company owning cemetery and applying for	Certificate of	f Registration:			
	(If Parent Corporation controls Applicant Corporation,					
3.	Operating Company's Physical Address:	(Street)				
			Telephone ()		
-	(City) (State) (Zip)		•	,		
1.	Operating Company's Mailing Address:	(P.O. Box or S				
		•	m 1 1 /)		
	(City) (State) (Zip)		rerephone (/		
5.	Parent Corporation Physical Address:					
		(Street)	Talambana (`		
-	(City) (State) (Zip)		Telephone ()		
5.	Parent Corporation Mailing Address:					
		(P.O. Box or S	Street)			
	(City) (State) (Zip)		Telephone ()		
7.	Name of person responsible for compliance v	with cemetery	statutes:			
	Address:		Pho	ne ()		
	Is the applicant a currently chartered corpora				'Active" by	
		S 🗇	NO 🗖	oration carried as	ricuve by	
	The Applicant corporation's governing board					
•		•		Chairman		
				, Director		
				, Director		
10.	The principal shareholder is			who owns	%	
	of the capital stock. Other shareholders, in ar	ny order of pe	rcent of stock, are _			
		-				

	The president of the corporation is:				
	The president's business address is:				
	The chief executive officer of the corporation is the \square President \square Chairman of the Board \square Other				
11. The company holds contiguous acres for use as a single cemetery, of which					
	acres are developed for immediate use. The company will \square will not \square make pre-need sales of merchandise and services pursuant to 46-2-401, et seq., T.C.A.				
	The cemetery has installed or will soon install an underground mausoleum in which lawn crypts may be sold. YES \square NO \square				
14.	The company has constructed or will soon construct an above-ground mausoleum. YES \square NO \square One or more family-size mausoleums YES \square NO \square				
	The company does (will) make a separate charge for marker or marker base installation. YES \square NO \square The company does (will) assess a one-time charge on each contract for the care of markers, vases, etc YES \square NO \square				
17.	The company will assume operational control on				
18.	Buyers fiscal year To FROM				
19.	List all other cemeteries, in and outside Tennessee, owned in substantial part by the applicant corporation				
	(not parent Corporation)				
	corporation, a parent corporation or by any principal of either? YES \(\subseteq \text{NO} \subseteq \) Give names and details:				
21.	An Improvement Care Trust has been established at: (Name of Financial Institution)				
	and is presently funded in the principal amount of \$ or a surety bond in the amount of \$ or a surety bond in the amount of				
	A Merchandise & Services Trust has been established at				
21.	A filing fee of \$300 payable to the Department of Commerce and Insurance is attached. Typed:				
	(Name, Title of officer filing this application)				
	Signed:(Name, Title of officer filing this application)				
CE	tach a copy of the buy-sell agreement governing the transfer of ownership (not applicable to the original registration of a emetery). A copy of all provisions concerning rights, duties and liabilities respecting the two statutory trusts – those tained and those passed to the buyer – is applicable in lieu of the entire agreement.				
	TE OF TENNESSEE				
I,	INTY OF of do hereby state that the information contained				
ın th	is annual report is true and correct to the best of my knowledge and belief.				
Swo	(NOTARY SEAL) (Signature) rn to and subscribed before me this day of, 20				
Му	commission expires: Notary's Signature:				